



# SOLID WASTE LAND DISPOSAL FACILITY PERMIT RENEWAL APPLICATION

State Form 50386 (R/7-04)

Indiana Department of Environmental Management

## INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

Solid Waste Permits Section  
Office of Land Quality (N1154)  
100 N. Senate Ave., P.O. Box 6015  
Indianapolis, IN 46206-6015

**INSTRUCTIONS** This application form shall be used to apply for all solid waste land disposal facility permit renewals. Renewal application fees are established by IC 13-20-21. Pursuant to IAC 10-11-4(a), this application must be received by the Commissioner of the Indiana Department of Environmental Management at least 120 days prior to the expiration date of your current permit. When completed, please return this form and support documents to the address given in the box above.

### Section A. Permittee(s) Information

Name				
Address	Street	Apt. #	P.O. Box	Town/City
State	ZIP code	Telephone Number (with area code)		

### Section B. Facility Owners(s) Information

Name				
Address	Street	Apt. #	P.O. Box	Town/City
State	ZIP code	Telephone Number (with area code)		

### Section C. Operator(s) Information

Name				
Address	Street	Apt. #	P.O. Box	Town/City
State	ZIP code	Telephone Number (with area code)		

### Section D. Property Owner(s) Information

Name				
Address	Street	Apt. #	P.O. Box	Town/City
State	ZIP code	Telephone Number (with area code)		

Please note that in accordance with 329 IAC 10-13-4(b) the owner, operator & permittee of a solid waste land disposal facility, and the owner or owners of the land upon which the facility is located, shall be liable for any environmental harm caused by the facility.

### Section E. Facility Information

Facility Name		Permit Number
Mailing Address	Street	Apt. # P.O. Box Town/City
Facility Contact Person and Telephone Number (with area code)		
Type of Operation (please check one)		
<input type="checkbox"/> Sanitary Landfill (Municipal Solid Waste Landfill)	<input type="checkbox"/> Restricted Waste Site Type I	
<input type="checkbox"/> Sanitary Landfill (Non-municipal Solid Waste Landfill)	<input type="checkbox"/> Restricted Waste Site Type II	
<input type="checkbox"/> Construction/Demolition Site	<input type="checkbox"/> Restricted Waste Site Type III	
Acres Permitted for Waste Disposal	Remaining Life of Facility in Years	Daily Amount Received
Types of Waste Received		

**Section F. Names and Addresses of Affected Government Officials****1. Members of the board of county commissioners where facility is located**

<b>Typed Name</b>	<b>Typed Name</b>
Typed Address	Typed Address
Typed Address	Typed Address
Typed City, State, ZIP code	Typed City, State, ZIP code
<b>Typed Name</b>	<b>Typed Name</b>
Typed Address	Typed Address
Typed Address	Typed Address
Typed City, State, ZIP code	Typed City, State, ZIP code
<b>Typed Name</b>	<b>Typed Name</b>
Typed Address	Typed Address
Typed Address	Typed Address
Typed City, State, ZIP code	Typed City, State, ZIP code

**2. Mayor(s) of any city(s) affected by the permit application**

<b>Typed Name</b>	<b>Typed Name</b>
Typed Address	Typed Address
Typed Address	Typed Address
Typed City, State, ZIP code	Typed City, State, ZIP code
<b>Typed Name</b>	<b>Typed Name</b>
Typed Address	Typed Address
Typed Address	Typed Address
Typed City, State, ZIP code	Typed City, State, ZIP code

**Section F. Names and Addresses of Affected Government Officials (continued)****3. President(s) of town council(s) of any town(s) affected by the permit application**

Typed Name	Typed Name
Typed Address	Typed Address
Typed Address	Typed Address
Typed City, State, ZIP code	Typed City, State, ZIP code
Typed Name	Typed Name
Typed Address	Typed Address
Typed Address	Typed Address
Typed City, State, ZIP code	Typed City, State, ZIP code

Please use additional sheets as needed to include all local officials affected by this permit application.

**Section G. Attachments Required**

1. A legal description (defined by 329 IAC 10-2-104) of the facility location, including acreage thereof.
2. The names and addresses of all owners or last taxpayers of record of property of adjoining land that is within one-half (½) mile of the solid waste boundary.
3. A topographic plot plan that reflects the current condition of the facility and current elevations taken within six (6) months of the submittal of the application and accurately identifying the following information to a scale as required by 329 IAC 10-15-2(a), 329 IAC 10-24-2(a), or 329 IAC 10-32-2(a):
  - a. areas of final cover, including certified closed area, and type of final cover
  - b. filled areas lacking final cover, grading, and seeding
  - c. current areas of operation, including depth of waste fill
  - d. projected solid waste disposal areas on a per year basis for the next five (5) years
4. A copy of the latest approved final contour plot plan with scale, as required by 329 IAC 10-15-2(a)
5. A copy of the latest approved subgrade contours of the uppermost contour of the soil liner.
6. A copy of the fee transmittal form and check for a renewal fee as established by IC 13-20-21. Submit each check and original of fee transmittal form to IDEM Cashier's Office to address shown on transmittal form.

**Section H. Signatures and Certification Statements**

329 IAC 10-11-3(d) requires that the signatory for a permit application sign the following certification statement:

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. I further certify that I am authorized to submit this information."

Applicant's Name & Title Typed	Applicant's Signature	Date Signed
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